

DETAILED ACTION

1. This communication is responsive to Appeal Brief filed 01/22/2008.
Claims 1-43 are pending in this application. Claims 1, 14, 27, 40 are independent claims.

EXAMINER'S AMENDMENT

2. An examiner's amendment to the record appears below. Should the changes and/or additions be unacceptable to applicant, an amendment may be filed as provided by 37 CFR 1.312. To ensure consideration of such an amendment, it MUST be submitted no later than the payment of the issue fee.

Authorization for this examiner's amendment was given in a telephone interview with Applicant's representative, Colin B. Harris, on May 13, 2008.

The application has been amended as follows:

- **Cancel claims 7, 8**
- **Claim 1 has been amended as:**

A patient encounter electronic medical record apparatus comprising:
a processor;

an interface configured to receive data input by a physician and an output interface coupled to said processor;

a memory; and

a plurality of diagnosis specific pre-populated templates stored in said memory and accessible by said processor, default entries in said diagnosis specific pre-populated templates

being changeable to alternate values by said physician, said default entries being associated with a pre-determined diagnosis, wherein

said interface is configured to receive an input of a diagnosis entered by said physician, and, in response to the entered diagnosis, the interface is configured to output one or a plurality of said diagnosis specific pre-populated templates that correspond with the diagnosis entered by the physician,

said processor is configured to produce an electronic medical record from said output of said diagnosis specific pre-populated templates,

said diagnosis specific pre-populated templates being configured to enable said physician to perform said diagnosis in at least one of an office setting, a surgery setting, an analgesics setting, and a therapy setting, wherein

said diagnosis specific pre-populated templates are derived from at least one of a selective specialty specific database and an anatomic specific database, and

wherein said diagnosis specific pre-populated templates are end-user modifiable.

- **Cancel claims 20, 21**
- **Claim 14 has been amended as:**

A patient encounter electronic medical record apparatus comprising:
a processor;

inputting means for receiving data input by a physician and outputting means for

outputting data, said inputting means and said outputting means coupled to said processor;

memory means for storing data; and

a plurality of diagnosis specific pre-populated template means for structuring data stored in said memory means and accessible by said processor means, default entries in said diagnosis specific pre-populated template means being changeable to alternate values by said physician, said default entries being associated with a predetermined diagnosis; wherein

said inputting means is configured to receive an input of a diagnosis entered by said physician, and, in response to the entered diagnosis, the inputting means is configured to output one or a plurality of said diagnosis specific pre-populated template means that correspond with the diagnosis entered by the physician,

said processor produces an electronic medical record from said output of said diagnosis specific pre-populated template means,

said diagnosis specific pre-populated template means being configured to enable said physician to perform said diagnosis in at least one of an office setting, a surgery setting, an analgesics setting, and a therapy setting, wherein

said diagnosis specific pre-populated templates are derived from at least one of a selective specialty specific database and an anatomic specific database, and

wherein said diagnosis specific pre-populated templates are end-user modifiable.

- **Cancel claims 33, 34**
- **Claim 27 has been amended as:**

A patient encounter electronic medical record computer product comprising:

a processor;

an interface configured to receive data input by a physician and an output interface coupled to said processor;

a memory configured to hold computer-readable instructions; and

a plurality of diagnosis specific pre-populated templates stored in said memory and accessible by said processor, default entries in said diagnosis specific pre-populated templates being changeable to alternate values by said physician, said default entries being associated with a predetermined diagnosis, wherein

said interface is configured to receive an input of a diagnosis entered by said physician, and, in response to the entered diagnosis, the interface is configured to output one or a plurality of said diagnosis specific pre-populated templates that correspond with the diagnosis entered by the physician,

and wherein said processor is configured to produce an electronic medical record from said output of said diagnosis specific pre-populated templates,

said diagnosis specific pre-populated templates being configured to enable said physician to perform said diagnosis in at least one of an office setting, a surgery setting, an analgesics setting, and a therapy setting, wherein

said diagnosis specific pre-populated templates are derived from at least one of a selective specialty specific database and an anatomic specific database, and

wherein said diagnosis specific pre-populated templates are end-user modifiable,

- **Cancel claim 43**
- **Claim 40 has been amended as:**

A method for recording a patient encounter electronic medical record, comprising the steps of:

holding a plurality of diagnosis specific pre-populated templates with default entries in a memory accessible by a processor;

making a diagnosis by a physician;

entering the diagnosis made by the physician into the processor;

retrieving a subset of the plurality of diagnosis specific pre-populated templates that correspond with the diagnosis made by the physician, said retrieving step being performed after said step of entering the diagnosis;

verifying said default entries and changing as necessary said default entries in said subset of the diagnosis specific pre-populated templates by a physician input; and

producing an electronic medical record from said subset of diagnosis specific pre-populated templates and entries associated therewith, after said verifying step, wherein

said diagnosis specific pre-populated templates being configured to enable said physician to perform said diagnosis in at least one of an office setting, a surgery setting, an analgesics setting, and a therapy setting, wherein

said diagnosis specific pre-populated templates are derived from at least one of a selective specialty specific database and an anatomic specific database, and

wherein said diagnosis specific pre-populated templates are end-user modifiable.

Reasons for Allowance

3. Claims 1-6, 9-19, 22-32, 35-42 are allowed, now renumbered as 1-36.
4. The following is a statement of reasons for the indication of allowable subject matter:

The present invention relates to systems, methods, and computer products for clinical information capture and management. The present invention also relates to systems and processes by which electronic medical records may be created and modified in the clinical environment of a patient encounter.

Claims 1, 14, 27 recite, or similarly recite, in combination with the remaining elements, a patient encounter electronic medical record apparatus, computer product comprising:

a plurality of diagnosis specific pre-populated templates stored in said memory and accessible by said processor, default entries in said diagnosis specific pre-populated templates being changeable to alternate values by said physician, said default entries being associated with a pre-determined diagnosis, wherein

said interface is configured to receive an input of a diagnosis entered by said physician, and, in response to the entered diagnosis, the interface is configured to output one or a plurality of said diagnosis specific pre-populated templates that correspond with the diagnosis entered by the physician,

said processor is configured to produce an electronic medical record from said output of said diagnosis specific pre-populated templates,

said diagnosis specific pre-populated templates being configured to enable said physician to perform said diagnosis in at least one of an office setting, a surgery setting, an analgesics setting, and a therapy setting, wherein

said diagnosis specific pre-populated templates are derived from at least one of a selective specialty specific database and an anatomic specific database, and

wherein said diagnosis specific pre-populated templates are end-user modifiable.

The closest prior art, et al. Segal et al. (U.S. Patent No. 6,754,655), shows a substantially similar system for diagnosing medical conditions including neurological syndromes and other disorders. While Segal discloses a system for diagnosing medical conditions based upon findings which the physician has entered into the medical diagnosis system, Segal does not disclose the plurality of diagnosis specific pre-populated templates are generated in response to the *diagnosis*

entered by the physician. Furthermore, although Levy et al. (U.S. Patent No. 7,076,437) teaches a process in which a user enters an initial list of symptoms, and from the entered symptoms a list containing a disease or categories of disease is generated based on algorithms using statistical probabilities for diagnosis, neither the patient nor physician enters a diagnosis, whereas the claimed limitation requires a diagnosis is entered, and, in response to the entered diagnosis, a diagnosis specific pre-populated template is output. Therefore, Segal and Levy et al., singularly or in combination, still fail to anticipate or render the above cited limitations obvious.

Claim 40 recites, or similarly recites, in combination with the remaining elements, a method for recording a patient encounter electronic medical record comprising:

retrieving a subset of the plurality of diagnosis specific pre-populated templates that correspond with the diagnosis made by the physician, said retrieving step being performed after said step of entering the diagnosis;

verifying said default entries and changing as necessary said default entries in said subset of the diagnosis specific pre-populated templates by a physician input; and

producing an electronic medical record from said subset of diagnosis specific pre-populated templates and entries associated therewith, after said verifying step, wherein

said diagnosis specific pre-populated templates being configured to enable said physician to perform said diagnosis in at least one of an office setting, a surgery setting, an analgesics setting, and a therapy setting, wherein

said diagnosis specific pre-populated templates are derived from at least one of a selective specialty specific database and an anatomic specific database, and

wherein said diagnosis specific pre-populated templates are end-user modifiable.

The closest prior art, et al. Segal et al. (U.S. Patent No. 6,754,655), shows a substantially similar method for diagnosing medical conditions including neurological syndromes and other disorders. While Segal discloses a system for diagnosing medical conditions based upon findings which the physician has entered into the medical diagnosis system, Segal does not disclose the plurality of diagnosis specific pre-populated templates are generated in response to the *diagnosis entered by the physician*. Furthermore, although Levy et al. (U.S. Patent No. 7,076,437) teaches a process in which a user enters an initial list of symptoms, and from the entered symptoms a list containing a disease or categories of disease is generated based on algorithms using statistical probabilities for diagnosis, neither the patient nor physician enters a diagnosis, whereas the claimed limitation requires a diagnosis is entered, and, *in response to the entered diagnosis*, a diagnosis specific pre-populated template is output. Therefore, Segal and Levy et al., singularly or in combination, still fail to anticipate or render the above cited limitations obvious.

5. Any comments considered necessary by applicant must be submitted no later than the payment of the issue fee and, to avoid processing delays, should preferably accompany the issue fee. Such submissions should be clearly labeled "Comments on Statement of Reasons for Allowance".

Conclusion

6. Any inquiry concerning this communication or earlier communications from the examiner should be directed to Miranda Le whose telephone number is (571) 272-4112. The examiner can normally be reached on Monday through Friday from 8:30 AM to 5:00 PM.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, John R. Cottingham, can be reached on (571) 272-7079. The fax number to this Art Unit is 571-273-8300.

Any inquiry of a general nature or relating to the status of this application should be directed to the Group receptionist whose telephone number is (571) 272-2100.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free).

/Miranda Le/

Primary Examiner, Art Unit 2167